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|---|------------|--|----------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2009</b><br><i>(fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4319))</i>                                      |            | Docket Number (Optional)<br><b>31509-230190</b>        |          |
| Application Number      10/575,854-Conf. #9370  |            | Filed      June 21, 2006                               |          |
| For <b>MODULAR DEVICE FOR COATING SURFACES</b>  |            |  |          |
| Art Unit      1795  |            | Examiner      R. G. McDonald                           |          |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |            |  |          |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |            |  |          |
|   | <u>Fee</u> | <u>Small Entity Fee</u>                                |          |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))   | \$130      | \$65   | \$ 65.00 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$490      | \$245  | \$ _____ |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))   | \$1110     | \$555  | \$ _____ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$1730     | \$865  | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$2350     | \$1175   | \$ _____ |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.  |            |  |          |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |            |  |          |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |            |  |          |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.   |            |  |          |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No.: <u>22-0261</u> .                   |            |  |          |
| <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>               |            |  |          |
| I am the <input type="checkbox"/> applicant/inventor.   |            |  |          |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  |            |  |          |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration No. <u>60,767</u>   |            |  |          |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 <u>                                </u>   |            |  |          |
| <u>                                </u> /Christopher Ma/  |            | <u>                                </u> 1/25/2010      |          |
| Signature   |            | Date   |          |
| <u>                                </u> Christopher Ma  |            | <u>                                </u> (703) 760-1954 |          |
| Typed or printed name   |            | Telephone Number                                       |          |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. |            |  |          |
| <input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.  |            |  |          |